

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Joseph

First name

J

Middle name

Porada, Jr.

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-5215

About Debtor 1:**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live

650 W. 57th St #2
Clarendon Hills, IL 60514

Number, Street, City, State & ZIP Code

DuPage

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

PO Box 31232
Chicago, IL 60631

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy**Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. **How you will pay the fee** **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?** No.
 Yes.

District _____ When _____ Case number _____
 District _____ When _____ Case number _____
 District _____ When _____ Case number _____

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** No
 Yes.

Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____

11. **Do you rent your residence?** No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?** No. Go to Part 4. Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

 No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

 No. Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Debtor 1 Joseph J Porada, Jr.

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

<p>16. What kind of debts do you have?</p>	<p>16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”</p> <p><input checked="" type="checkbox"/> No. Go to line 16b.</p> <p><input type="checkbox"/> Yes. Go to line 17.</p>	
	<p>16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</p> <p><input type="checkbox"/> No. Go to line 16c.</p> <p><input checked="" type="checkbox"/> Yes. Go to line 17.</p>	
	<p>16c. State the type of debts you owe that are not consumer debts or business debts</p> <hr/>	
<p>17. Are you filing under Chapter 7?</p>		
<p>Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?</p>	<p><input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.</p>	
	<p><input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?</p>	
	<p><input type="checkbox"/> No</p>	
	<p><input type="checkbox"/> Yes</p>	
<p>18. How many Creditors do you estimate that you owe?</p>		
<p><input checked="" type="checkbox"/> 1-49</p>	<p><input type="checkbox"/> 1,000-5,000</p>	<p><input type="checkbox"/> 25,001-50,000</p>
<p><input type="checkbox"/> 50-99</p>	<p><input type="checkbox"/> 5001-10,000</p>	<p><input type="checkbox"/> 50,001-100,000</p>
<p><input type="checkbox"/> 100-199</p>	<p><input type="checkbox"/> 10,001-25,000</p>	<p><input type="checkbox"/> More than 100,000</p>
<p><input type="checkbox"/> 200-999</p>		
<p>19. How much do you estimate your assets to be worth?</p>		
<p><input type="checkbox"/> \$0 - \$50,000</p>	<p><input checked="" type="checkbox"/> \$1,000,001 - \$10 million</p>	<p><input type="checkbox"/> \$500,000,001 - \$1 billion</p>
<p><input type="checkbox"/> \$50,001 - \$100,000</p>	<p><input type="checkbox"/> \$10,000,001 - \$50 million</p>	<p><input type="checkbox"/> \$1,000,000,001 - \$10 billion</p>
<p><input type="checkbox"/> \$100,001 - \$500,000</p>	<p><input type="checkbox"/> \$50,000,001 - \$100 million</p>	<p><input type="checkbox"/> \$10,000,000,001 - \$50 billion</p>
<p><input type="checkbox"/> \$500,001 - \$1 million</p>	<p><input type="checkbox"/> \$100,000,001 - \$500 million</p>	<p><input type="checkbox"/> More than \$50 billion</p>
<p>20. How much do you estimate your liabilities to be?</p>		
<p><input type="checkbox"/> \$0 - \$50,000</p>	<p><input checked="" type="checkbox"/> \$1,000,001 - \$10 million</p>	<p><input type="checkbox"/> \$500,000,001 - \$1 billion</p>
<p><input type="checkbox"/> \$50,001 - \$100,000</p>	<p><input type="checkbox"/> \$10,000,001 - \$50 million</p>	<p><input type="checkbox"/> \$1,000,000,001 - \$10 billion</p>
<p><input type="checkbox"/> \$100,001 - \$500,000</p>	<p><input type="checkbox"/> \$50,000,001 - \$100 million</p>	<p><input type="checkbox"/> \$10,000,000,001 - \$50 billion</p>
<p><input type="checkbox"/> \$500,001 - \$1 million</p>	<p><input type="checkbox"/> \$100,000,001 - \$500 million</p>	<p><input type="checkbox"/> More than \$50 billion</p>

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Joseph J Porada, Jr.

Joseph J. Porada,

Signature of Debtor 1

Signature of Debtor 2

Executed on December 6, 2017
MM / DD / YYYY

Executed on

MM / DD / YYYY

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Terence G. Banich
Signature of Attorney for Debtor

Date

December 6, 2017
MM / DD / YYYY

Terence G. Banich

Printed name

Shaw Fishman Glantz & Towbin LLC

Firm name

321 N. Clark Street
Suite 800
Chicago, IL 60654

Number, Street, City, State & ZIP Code

Contact phone 312-541-0151

Email address

tbanich@shawfishman.com

6269359

Bar number & State

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

		Unsecured claim
1	Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	What is the nature of the claim? taxes \$ \$333,000.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____
2	James Porada 650 W 57th St Clarendon Hills, IL 60514	What is the nature of the claim? Domestic support obligation \$ \$232,000.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____

Debtor 1	<u>Joseph J Porada, Jr.</u>	Case number (if known)	
Contact phone		Unsecured claim	\$ _____
3	What is the nature of the claim?	Domestic support obligation	\$ \$105,000.00
<p>Laura J. Porada 216 Middaugh Rd Clarendon Hills, IL 60514</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply</p>			
<p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____</p>			
4	What is the nature of the claim?	taxes	\$ \$75,000.00
<p>Illinois Dept. of Revenue P.O. Box 19017 Springfield, IL 62794-9017</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply</p>			
<p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____</p>			
5	What is the nature of the claim?	legal fees	\$ \$60,000.00
<p>Rathje & Woodward LLC 300 E Roosevelt Rd Wheaton, IL 60187</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply</p>			
<p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____</p>			
6	What is the nature of the claim?	dental care	\$ \$1,115.00
<p>Robin B. Blakkolb, DDS 6800 S. Main St #106 Downers Grove, IL 60516</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply</p>			

Debtor 1	<u>Joseph J Porada, Jr.</u>	Case number (if known)	
<hr/>			
Does the creditor have a lien on your property?			
<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim _____</p>			
<hr/>			
7	Northern Trust Platinum Visa PO Box 6335 Fargo, ND 58125-6335	What is the nature of the claim?	credit card \$ <u>\$647.29</u>
As of the date you file, the claim is: Check all that apply			
<p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> None of the above apply</p>			
<hr/>			
Does the creditor have a lien on your property?			
<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim _____</p>			
<hr/>			
8	Comcast/Xfinity PO Box 3002 Southeastern, PA 19398-3002	What is the nature of the claim?	service \$ <u>\$280.11</u>
As of the date you file, the claim is: Check all that apply			
<p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> None of the above apply</p>			
<hr/>			
Does the creditor have a lien on your property?			
<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim _____</p>			
<hr/>			
9	ComEd 3 Lincoln Center Attn: Bankruptcy Group Oakbrook Terrace, IL 60181	What is the nature of the claim?	service \$ <u>\$59.34</u>
As of the date you file, the claim is: Check all that apply			
<p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> None of the above apply</p>			
<hr/>			
Does the creditor have a lien on your property?			
<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim _____</p>			
<hr/>			
10	Nicor Gas Bankruptcy Dept	What is the nature of the claim?	service \$ <u>\$45.48</u>

Debtor 1 Joseph J Porada, Jr.

Case number (if known) _____

PO Box 549
Aurora, IL 60507

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

11

Country Acres Condominium Assoc
Country Acres HOA
640 Murray Lane Box CACHA
Des Plaines, IL 60016

What is the nature of the claim? 640 Murray Lane Des \$ Unknown
Plaines, IL 60016 Cook
County
PIN
08-24-100-025-1046

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ Unknown
Value of security: - \$ \$70,000.00
Unsecured claim \$ Unknown

12

Estate of Arthur M Heath
c/o Latimer Levay Fyock LLC
55 W Monroe St #1100
Chicago, IL 60603

What is the nature of the claim? litigation \$ \$0.00

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

13

James Yiu-Tin Ching
c/o Scopelitis Garvin Light
30 W Monroe St #600
Chicago, IL 60603

What is the nature of the claim? litigation \$ \$0.00

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Debtor 1 Joseph J Porada, Jr. Case number (if known)

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

14 What is the nature of the claim? litigation \$ \$0.00

|- Mohammad Rezai MD
c/o Latimer Levay Fyock LLC
55 W Monroe St #1100
Chicago, IL 60603

What is the nature of the claim? litigation **\$** **\$0.00**

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

No
 Yes. Total claim (secured and unsecured) \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ Joseph J Porada, Jr.
Joseph J Porada, Jr.
Signature of Debtor 1

X _____
Signature of Debtor 2

Date December 6, 2017 Date

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 70,000.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 70,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 5,844,931.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 5,914,931.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 0.00
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 745,000.00
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 745,000.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 62,147.22
		Your total liabilities \$ 807,147.22

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 20.00
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 20.00
5.	Schedule J: Your Expenses (Official Form 106J)	\$ 15,535.00
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 15,535.00

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?**

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Joseph J Porada, Jr.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$	_____
----	-------

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ 337,000.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 408,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 745,000.00

Fill in this information to identify your case and this filing:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number			<input type="checkbox"/> Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

1.1

640 Murray Lane

Street address, if available, or other description

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative

 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Des Plaines IL 60016-0000
City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
\$70,000.00	\$70,000.00

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

100% Beneficial Interest in Land Trust

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

PIN 08-24-100-025-1046

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$70,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 Joseph J Porada, Jr.

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Case number (if known)

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

 No Yes

3.1 Make: Toyota
 Model: Avalon
 Year: 2014
 Approximate mileage: 90,000

Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$12,000.00

\$12,000.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$12,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

 No Yes. Describe.....

Ordinary household furnishings

\$7,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....

Television/computer/printer/cell phone

\$1,000.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No

Debtor 1 Joseph J Porada, Jr.

 Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....

Ordinary wearing apparel	\$3,000.00
--------------------------	------------

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$11,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash	\$40,000.00
------	-------------

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking	Joseph J Porada Jr Revocable Trust is owner of checking account at Northern Trust Bank	\$201,500.00
17.2. Checking	Joseph J Porada Jr Revocable Trust is owner of checking account at Northern Trust Bank	\$2,000.00
17.3. Checking	Joseph J Porada Jr Revocable Trust is owner of check account at Republic Bank	\$1,170,465.00
17.4. Checking	Joseph J Porada Jr Revocable Trust is owner of checking account at Inland Bank	\$378.00

Debtor 1

Joseph J Porada, Jr.

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Case number (if known)

17.5. Savings	Joseph J Porada Jr Revocable Trust is owner of savings account at Northern Trust Bank	\$501.00
17.6. Checking	Joseph J Porada Jr Revocable Trust is owner of checking account at Bank of America	\$6,232.00
17.7. Checking	Joseph J Porada Jr Revocable Trust is owner of checking account at First Midwest Bank	\$1,341.00
17.8. Money Market	Joseph J Porada Jr Revocable Trust is owner of money market account at Community Bank of Downers Grove	\$347.00
17.9. Money Market	Joseph J Porada Jr Revocable Trust is owner of money market account at PNC Bank	\$9,885.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

Joseph J Porada Jr Revocable Trust is owner of brokerage account at Merrill Edge	\$21,249.00
--	-------------

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

KKJJ, LLC ** value = court assigned value - under appeal	44%	%	\$703,890.00
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Sharon Estates Limited Partnership ** value = court assigned value - under appeal	30.46%	%	\$321,750.00
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Midwest Imaging Professionals, LLC	4%	%	Unknown
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20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

Promissory notes owed by Robert J. Fisher	\$260,000.00
---	--------------

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account:

Institution name:

401(k)	Midwest Imaging Professionals, LLC	\$250,570.00
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Debtor 1

Joseph J Porada, Jr.

Document Page 19 of 65

Case number (if known)

Pension	Midwest Imaging Professionals, LLC	\$431,013.00
IRA	Morgan Stanley	\$69,942.00
Profit-Sharing Plan	Symmetra	\$1,441,043.00
Profit-Sharing Plan	Charles Schwab	\$800,675.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.

Institution name or individual:

Rental deposit	Philip Ducato	\$2,150.00
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23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...Joseph J. Porada , Jr Irrevocable Family Trust dated March 7, 1995
holds all life insurance policies referred to in question no. 31.

Unknown

Joseph J. Porada, Jr. Revocable Trust holds the financial accounts
identified in question no's. 17 and 18, the membership interests in
KKJJ, LLC and Sharon Estates Limited Partnership as identified in
question no. 19, as well as the promissory notes identified in question
20.

Unknown

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them...State of Illinois Licensed Physician and Surgeon
State of Illinois Licensed Physician Controlled Substance
US Department of Justice Controlled Substance Registration Certificate

Unknown

Money or property owed to you?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

 No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information..Balance of funds due pursuant to membership redemption
agreement with Midwest Imaging Professionals LLC

\$87,000.00

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund
value:John Hancock term life policies
075214153 and 075214155Joseph J. Porada Jr.
Irrevocable Family Trust

\$0.00

Paul Revere disability policy

Joseph J. Porada Jr.
Irrevocable Family Trust

\$0.00

BC/BS Health Insurance

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

 No Yes. Describe each claim.....

35. Any financial assets you did not already list

 No Yes. Give specific information..36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached
for Part 4. Write that number here.....

\$5,821,931.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debtor 1

Joseph J Porada, Jr.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	.....	\$70,000.00
56. Part 2: Total vehicles, line 5	.....	\$12,000.00
57. Part 3: Total personal and household items, line 15	.....	\$11,000.00
58. Part 4: Total financial assets, line 36	.....	\$5,821,931.00
59. Part 5: Total business-related property, line 45	.....	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	.....	\$0.00
61. Part 7: Total other property not listed, line 54	+	\$0.00
62. Total personal property. Add lines 56 through 61...	.....	\$5,844,931.00
		Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	.....	\$5,914,931.00

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
2014 Toyota Avalon 90,000 miles Line from <i>Schedule A/B</i> : 3.1	\$12,000.00	<input checked="" type="checkbox"/> \$2,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Ordinary wearing apparel Line from <i>Schedule A/B</i> : 11.1	\$3,000.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Cash Line from <i>Schedule A/B</i> : 16.1	\$40,000.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
401(k): Midwest Imaging Professionals, LLC Line from <i>Schedule A/B</i> : 21.1	\$250,570.00	<input checked="" type="checkbox"/> \$250,570.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
Pension: Midwest Imaging Professionals, LLC Line from <i>Schedule A/B</i> : 21.2	\$431,013.00	<input checked="" type="checkbox"/> \$431,013.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006

Debtor 1 Joseph J Porada, Jr.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
IRA: Morgan Stanley Line from Schedule A/B: 21.3	\$69,942.00	<input checked="" type="checkbox"/> \$69,155.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
Profit-Sharing Plan: Symmetra Line from Schedule A/B: 21.4	\$1,441,043.00	<input checked="" type="checkbox"/> \$1,441,043.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
Profit-Sharing Plan: Charles Schwab Line from Schedule A/B: 21.5	\$800,675.00	<input checked="" type="checkbox"/> \$800,675.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
Joseph J. Porada , Jr Irrevocable Family Trust dated March 7, 1995 holds all life insurance policies referred to in question no. 31. Line from Schedule A/B: 25.1	Unknown	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(h)(3)
Paul Revere disability policy Beneficiary: Joseph J. Porada Jr. Irrevocable Family Trust Line from Schedule A/B: 31.2	\$0.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	215 ILCS 5/238

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Cook County Treasurer	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Creditor's Name Law Dep't. 118 North Clark Street Chicago, IL 60602 Number, Street, City, State & Zip Code	\$0.00	\$70,000.00	\$0.00

Describe the property that secures the claim:

640 Murray Lane Des Plaines, IL
60016 Cook County
PIN 08-24-100-025-1046
notice purposes only

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

2.2	Country Acres Condominium Assoc	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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Describe the property that secures the claim:

640 Murray Lane Des Plaines, IL
60016 Cook County
PIN 08-24-100-025-1046

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Debtor 1 Joseph J Porada, Jr. Case number (if known) _____
First Name _____ Middle Name _____ Last Name _____

Date debt was incurred _____ Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$0.00
\$0.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount	
2.1	Last 4 digits of account number	\$75,000.00	\$0.00	\$75,000.00
	Priority Creditor's Name	P.O. Box 19017	Springfield, IL 62794-9017	Number Street City State Zip Code
	When was the debt incurred?	12/2017 and 12/2015		
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify taxes			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Joseph J Porada, Jr.

2.2	Internal Revenue Service	\$333,000.00		
	Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code	Last 4 digits of account number 0	\$0.00	\$333,000.00
	When was the debt incurred? 12/2017			
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify taxes			
2.3	James Porada	\$232,000.00		
	Priority Creditor's Name 650 W 57th St Clarendon Hills, IL 60514 Number Street City State Zip Code	Last 4 digits of account number 0	\$200,000.00	\$32,000.00
	When was the debt incurred? 1/2009			
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of PRIORITY unsecured claim:			
	<input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify Domestic support obligation			
2.4	Laura J. Porada	\$105,000.00		
	Priority Creditor's Name 216 Middaugh Rd Clarendon Hills, IL 60514 Number Street City State Zip Code	Last 4 digits of account number 0	\$0.00	\$105,000.00
	When was the debt incurred? 1/2009			
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of PRIORITY unsecured claim:			
	<input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify Domestic support obligation			

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Debtor 1 Joseph J Porada, Jr.

Part 2.

			Total claim
4.1	<p>Comcast/Xfinity Nonpriority Creditor's Name PO Box 3002 Southeastern, PA 19398-3002 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 8214</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>service</u></p>	\$280.11
4.2	<p>ComEd Nonpriority Creditor's Name 3 Lincoln Center Attn: Bankruptcy Group Oakbrook Terrace, IL 60181 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 7022</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>service</u></p>	\$59.34
4.3	<p>Estate of Arthur M Heath Nonpriority Creditor's Name c/o Latimer Levay Fyock LLC 55 W Monroe St #1100 Chicago, IL 60603 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? 7/2017</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>litigation</u></p>	Unknown

Debtor 1 Joseph J Porada, Jr.

4.4	<p>James Yiu-Tin Ching Nonpriority Creditor's Name c/o Scopelitis Garvin Light 30 W Monroe St #600 Chicago, IL 60603 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>litigation</u></p>	<p>Unknown</p>
4.5	<p>Mohammad Rezai MD Nonpriority Creditor's Name c/o Latimer Levay Fyock LLC 55 W Monroe St #1100 Chicago, IL 60603 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? <u>7/2017</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>litigation</u></p>	<p>Unknown</p>
4.6	<p>Nicor Gas Nonpriority Creditor's Name Bankruptcy Dept PO Box 549 Aurora, IL 60507 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>4740</u> \$45.48</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>service</u></p>	

Debtor 1 Joseph J Porada, Jr.

4.7	Northern Trust Platinum Visa Nonpriority Creditor's Name PO Box 6335 Fargo, ND 58125-6335 Number Street City State Zip Code	Last 4 digits of account number _____	\$647.29
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>credit card</u></p>			
4.8	Rathje & Woodward LLC Nonpriority Creditor's Name 300 E Roosevelt Rd Wheaton, IL 60187 Number Street City State Zip Code	Last 4 digits of account number _____	\$60,000.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>When was the debt incurred? 2017</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>legal fees</u></p>			
4.9	Robin B. Blakkob, DDS Nonpriority Creditor's Name 6800 S. Main St #106 Downers Grove, IL 60516 Number Street City State Zip Code	Last 4 digits of account number _____	\$1,115.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>dental care</u></p>			

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Xfinity
155 Industrial Dr

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Joseph J Porada, Jr.

Elmhurst, IL 60126

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	Total Claim	
	6a.	\$ 337,000.00
6b.	6b.	\$ 408,000.00
6c.	6c.	\$ 0.00
6d.	6d.	\$ 0.00
6e. Total Priority. Add lines 6a through 6d.	6e.	\$ 745,000.00
Total claims from Part 2	Total Claim	
	6f.	\$ 0.00
6g.	6g.	\$ 0.00
6h.	6h.	\$ 0.00
6i.	6i.	\$ 62,147.22
6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 62,147.22

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Philip Ducato 650 W. 57th St #1 Clarendon Hills, IL 60514	residential lease

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2	(Spouse if, filing)		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name _____
Number _____ Street _____ State _____ ZIP Code _____

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

3.2

Name _____
Number _____ Street _____ State _____ ZIP Code _____

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS
Case number (if known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Physician	
Employer's name		
Employer's address		

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>N/A</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>N/A</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>N/A</u>

Debtor 1 <u>Joseph J Porada, Jr.</u>	Case number (if known)																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 35%; text-align: center;">For Debtor 1</th> <th style="width: 35%; text-align: center;">For Debtor 2 or non-filing spouse</th> </tr> </thead> <tbody> <tr> <td>Copy line 4 here</td> <td style="text-align: center;">4. \$ <u>0.00</u></td> <td style="text-align: center;">\$ <u>N/A</u></td> </tr> </tbody> </table>			For Debtor 1	For Debtor 2 or non-filing spouse	Copy line 4 here	4. \$ <u>0.00</u>	\$ <u>N/A</u>																		
	For Debtor 1	For Debtor 2 or non-filing spouse																							
Copy line 4 here	4. \$ <u>0.00</u>	\$ <u>N/A</u>																							
<p>5. List all payroll deductions:</p> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">5a. Tax, Medicare, and Social Security deductions</td> <td style="width: 20%;">5a. \$ <u>0.00</u></td> <td style="width: 20%;">\$ <u>N/A</u></td> </tr> <tr> <td>5b. Mandatory contributions for retirement plans</td> <td>\$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>5c. Voluntary contributions for retirement plans</td> <td>\$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>5d. Required repayments of retirement fund loans</td> <td>\$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>5e. Insurance</td> <td>\$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>5f. Domestic support obligations</td> <td>\$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>5g. Union dues</td> <td>\$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>5h. Other deductions. Specify: _____</td> <td>5h.+ \$ <u>0.00</u></td> <td>+\$ <u>N/A</u></td> </tr> </table>		5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>N/A</u>	5b. Mandatory contributions for retirement plans	\$ <u>0.00</u>	\$ <u>N/A</u>	5c. Voluntary contributions for retirement plans	\$ <u>0.00</u>	\$ <u>N/A</u>	5d. Required repayments of retirement fund loans	\$ <u>0.00</u>	\$ <u>N/A</u>	5e. Insurance	\$ <u>0.00</u>	\$ <u>N/A</u>	5f. Domestic support obligations	\$ <u>0.00</u>	\$ <u>N/A</u>	5g. Union dues	\$ <u>0.00</u>	\$ <u>N/A</u>	5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+\$ <u>N/A</u>
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>N/A</u>																							
5b. Mandatory contributions for retirement plans	\$ <u>0.00</u>	\$ <u>N/A</u>																							
5c. Voluntary contributions for retirement plans	\$ <u>0.00</u>	\$ <u>N/A</u>																							
5d. Required repayments of retirement fund loans	\$ <u>0.00</u>	\$ <u>N/A</u>																							
5e. Insurance	\$ <u>0.00</u>	\$ <u>N/A</u>																							
5f. Domestic support obligations	\$ <u>0.00</u>	\$ <u>N/A</u>																							
5g. Union dues	\$ <u>0.00</u>	\$ <u>N/A</u>																							
5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+\$ <u>N/A</u>																							
<p>6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ <u>0.00</u> \$ <u>N/A</u></p>																									
<p>7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ <u>0.00</u> \$ <u>N/A</u></p>																									
<p>8. List all other income regularly received:</p> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</td> <td style="width: 20%;">8a. \$ <u>0.00</u></td> <td style="width: 20%;">\$ <u>N/A</u></td> </tr> <tr> <td>8b. Interest and dividends</td> <td>8b. \$ <u>20.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</td> <td>8c. \$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>8d. Unemployment compensation</td> <td>8d. \$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>8e. Social Security</td> <td>8e. \$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____</td> <td>8f. \$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>8g. Pension or retirement income</td> <td>8g. \$ <u>0.00</u></td> <td>\$ <u>N/A</u></td> </tr> <tr> <td>8h. Other monthly income. Specify: _____</td> <td>8h.+ \$ <u>0.00</u></td> <td>+\$ <u>N/A</u></td> </tr> </table>		8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>0.00</u>	\$ <u>N/A</u>	8b. Interest and dividends	8b. \$ <u>20.00</u>	\$ <u>N/A</u>	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>0.00</u>	\$ <u>N/A</u>	8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>N/A</u>	8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>N/A</u>	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u>0.00</u>	\$ <u>N/A</u>	8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>N/A</u>	8h. Other monthly income. Specify: _____	8h.+ \$ <u>0.00</u>	+\$ <u>N/A</u>
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>0.00</u>	\$ <u>N/A</u>																							
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8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>N/A</u>																							
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>N/A</u>																							
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8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>N/A</u>																							
8h. Other monthly income. Specify: _____	8h.+ \$ <u>0.00</u>	+\$ <u>N/A</u>																							
<p>9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ <u>20.00</u> \$ <u>N/A</u></p>																									
<p>10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. \$ <u>20.00</u> + \$ <u>N/A</u> = \$ <u>20.00</u></p>																									
<p>11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____ 11. +\$ <u>0.00</u></p>																									
<p>12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i>, if it applies 12. \$ <u>20.00</u></p>																									
<p>13. Do you expect an increase or decrease within the year after you file this form?</p> <p><input type="checkbox"/> No.</p> <p><input checked="" type="checkbox"/> Yes. Explain: <u>Debtor expects to be employed as a Radiologist in private practice in the near future.</u></p>																									

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>	
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Do not state the
dependents names.

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

Son	16	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 2,150.00

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	0.00
4b. \$	50.00
4c. \$	0.00
4d. \$	0.00
5. \$	0.00

Debtor 1 Joseph J Porada, Jr.

Case number (if known) _____

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$ 250.00
6b. Water, sewer, garbage collection	6b. \$ 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 200.00
6d. Other. Specify:	6d. \$ 0.00

7. Food and housekeeping supplies

8. Childcare and children's education costs	7. \$ 300.00
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9. Clothing, laundry, and dry cleaning

10. Personal care products and services

11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare.

Do not include car payments.

13. Entertainment, clubs, recreation, newspapers, magazines, and books

14. Charitable contributions and religious donations

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$ 400.00
15b. Health insurance	15b. \$ 2,000.00
15c. Vehicle insurance	15c. \$ 150.00
15d. Other insurance. Specify: Disability	15d. \$ 800.00

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____ 16. \$ 0.00

17. Installment or lease payments:

17a. Car payments for Vehicle 1	17a. \$ 0.00
17b. Car payments for Vehicle 2	17b. \$ 0.00
17c. Other. Specify:	17c. \$ 0.00
17d. Other. Specify:	17d. \$ 0.00

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you.

Specify: _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 150.00
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00

21. Other: Specify: Storage unit rental fee

22. Calculate your monthly expenses

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

\$ 15,535.00
\$
\$ 15,535.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23a. \$ 20.00
23b. -\$ 15,535.00

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

\$ -15,515.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

/s/ Joseph J Porada, Jr.

Joseph J Porada, Jr.
Signature of Debtor 1

Date December 6, 2017

X

Signature of Debtor 2

Date _____

Fill in this information to identify your case:

Debtor 1	Joseph J Porada, Jr.		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

2540 Ogden Ave
Downers Grove, IL 60515

Dates Debtor 1
lived there

From-To:
12/12-4/17

Debtor 2 Prior Address:

Same as Debtor 1

Dates Debtor 2
lived there

Same as Debtor 1
From-To:

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Check all that apply.		Sources of income Check all that apply.	

From January 1 of current year until
the date you filed for bankruptcy:

Wages, commissions,
bonuses, tips
 Operating a business

\$350,000.00

Wages, commissions,
bonuses, tips
 Operating a business

	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$747,289.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, 2015)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$758,598.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Interest / Dividends	\$204.00		
For last calendar year: (January 1 to December 31, 2016)	Interest / Dividends	\$227.00		
For the calendar year before that: (January 1 to December 31, 2015)	Interest / Dividends	\$653.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
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Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Rathje & Woodward LLC 300 E Roosevelt Rd Wheaton, IL 60187	10/8/17 \$50,000 12/4/17 \$30,000	\$80,000.00	\$60,000.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>legal fees</u>
Philip Ducato 650 W. 57th St #1 Clarendon Hills, IL 60514	10/1/17 \$2,150.00 11/1/17 \$2,150.00 12/1/17 \$2,150.00	\$6,450.00	\$0.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>rent</u>

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No
 Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No
 Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No
 Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Rezai, Heath, Ching et al v. Joseph Porada 2016 CH 08440	Breach of Contract	Circuit Court of Cook County Chancery Division 50 W Washington Chicago, IL 60602	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
	Explain what happened		

Creditor Name and Address	Describe the Property	Date	Value of the property
James Yiu-tin Ching c/o Scopelitis Garvin Light 30 W Monroe St #600 Chicago, IL 60603	Bank accounts at Northern Trust Co accounts ending 7630, 1151,6355,7397,4548,1294	8/2017	\$51,573.00
Explain what happened			
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

Katherine Porada
316 S Garfield Ave
Champaign, IL 61821

Cash gift

1/2016

\$13,000.00

Person's relationship to you: Daughter

Katherine Porada 316 S Garfield Ave Champaign, IL 61821	Cash gift	7/2017	\$14,000.00
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Person's relationship to you: Daughter

Kristina Porada 501 N Capitol Ave #2118 Indianapolis, IN 46204	Cash gift	1/2016	\$13,000.00
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Person's relationship to you: Daughter

Kristina Porada 501 N Capitol Ave #2118 Indianapolis, IN 46204	Cash gift	7/2017	\$14,000.00
--	-----------	--------	-------------

Person's relationship to you: Daughter

Debtor 1 Joseph J Porada, Jr.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address: Joseph Porada III 507 Selfridge St Bethlehem, PA 18015	Cash gift	1/2016	\$13,000.00
Person's relationship to you: Son			
Joseph Porada III 507 Selfridge St Bethlehem, PA 18015	Cash gift	7/2017	\$14,000.00
Person's relationship to you: Son			
James Porada 650 W 57th St Clarendon Hills, IL 60514	Cash gift	1/2016	\$13,000.00
Person's relationship to you: Son			
James Porada 650 W 57th St Clarendon Hills, IL 60514	Cash gift	7/2017	\$14,000.00
Person's relationship to you: Son			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Notre Dame Parish, St Joseph Parish Holy Trinity Parish	cash	various	\$2,000.00

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Address Email or website address Person Who Made the Payment, if Not You Shaw Fishman Glantz & Towbin LLC 321 N. Clark Street Suite 800 Chicago, IL 60654	Attorney Fees	11/29/17	\$50,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Address			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Address			
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Northern Trust Co. 50 S. LaSalle St. Chicago, IL 60606	XXXX-2009	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	9/18/17	\$4,971.00
Northern Trust Co. 50 S. LaSalle St. Chicago, IL 60606	XXXX-1151	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	9/18/17	\$11,229.00
Northern Trust One OakBrook Terrace Oak Brook Terrace, IL 60181	XXXX-7397	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	9/18/17	\$4,152.00
MB Financial Bank Oak Brook, IL 60521	XXXX-2325	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	9/18/17	\$6,948.00
CitiBank PO Box 6201 Sioux Falls, SD 57117	XXXX-6389	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	9/18/17	\$2,060.00
Wells Fargo PO Box 6995 Portland, OR 97228	XXXX-4216	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	9/18/17	\$1,231.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Royal Bank 21 E Ogden Ave Westmont, IL 60559		Cash, Copies of Will, Irrevocable Trust, Revocable Trust, Passport, Social Security Card, Insurance policies, legal documents	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

 No Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
The Lockup Self Storage 755 Plainfield Rd Willowbrook, IL 60527		Financial and business records, books, clothing, furniture	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

 No Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

 No Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

 No Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

 No Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

Debtor 1 Joseph J Porada, Jr.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

A partner in a partnership

An officer, director, or managing executive of a corporation

An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
KKJJ, LLC 216 Middaugh Rd Clarendon Hills, IL 60514	Owns and operates commerical shopping center Kavooras & Bouzkao CPA	Dates business existed EIN: 27-0902845 From-To 2009-present
Sharon Estate Limited Partnership 13719 W Laurel Lake Forest, IL 60045	Owns and operates manufacturing developmental housing Robert E. Lee	EIN: 36-4059511 From-To 1998- present
Midwest Imaging Professionals, LLC 903 Commerce Dr. #338 Oak Brook, IL 60523	Imaging	EIN: 45-3154648 From-To 7/2012-11/2017

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Joseph J Porada, Jr.

Joseph J Porada, Jr.
Signature of Debtor 1

Signature of Debtor 2

Date December 6, 2017

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 Joseph J Porada, Jr.

Debtor 2 _____
(Spouse, if filing) _____

United States Bankruptcy Court for the: Northern District of Illinois

Case number _____
(if known) _____

Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/15

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>0.00</u>	\$ <u>0.00</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ <u>0.00</u>	\$ <u>0.00</u>
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	\$ <u>0.00</u>
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	\$ <u>0.00</u>
Copy here -> \$ <u>0.00</u> \$ <u>0.00</u>		
6. Net income from rental and other real property	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ <u>0.00</u>	\$ <u>0.00</u>
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	\$ <u>0.00</u>
Net monthly income from rental or other real property	\$ <u>0.00</u>	\$ <u>0.00</u>
Copy here -> \$ <u>0.00</u> \$ <u>0.00</u>		

Debtor 1 Joseph J Porada, Jr.

Case number (if known) _____

7. **Interest, dividends, and royalties**
 8. **Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ 0.00
 For your spouse \$ _____

Column A Debtor 1	Column B Debtor 2
\$ <u>0.00</u>	\$ _____
\$ <u>0.00</u>	\$ _____

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism.

If necessary, list other sources on a separate page and put the total below.

_____ \$ _____
 _____ \$ 0.00 \$ _____
 Total amounts from separate pages, if any. **+** \$ 0.00 \$ _____

\$ <u>0.00</u>	+	\$ _____	=	\$ <u>0.00</u>
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11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

Debtor 1 Joseph J Porada, Jr.

Case number (*if known*) _____

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

/s/ Joseph J Porada, Jr.
Joseph J Porada, Jr.
Signature of Debtor 1

Date December 6, 2017
MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245	filin	g fee
\$75	admi	nistrative fee
+ <u> \$15</u>	<u>trustee surcharge</u>	
\$335 total fee		

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+ \$550	administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	<u>administrative fee</u>
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	<u>administrative fee</u>
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court
Northern District of Illinois

In re Joseph J Porada, Jr.

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

	\$	Per Attached Retention Agreement
For legal services, I have agreed to accept	\$
Prior to the filing of this statement I have received	\$
Balance Due	\$

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

12/6/17
Date

/s/ Terence Banich
Terence Banich
Signature of Attorney
Shaw Fishman Glantz & Towbin LLC
321 N. Clark Street
Suite 800
Chicago, IL 60654
312-541-0151 Fax: 312-980-3888
tbanich@shawfishman.com
Name of law firm



November 29, 2017

Terence G. Banich

Member

Direct 312.980.3859

Fax 312.980.3888

tbanich@shawfishman.com

VIA E-MAIL

Joseph Porada, M.D.
650 W. 57th St.
Clarendon Hills, Illinois 60514
jiporada@hotmail.com

Re: Retention Agreement (the “Agreement”)

Dear Dr. Porada:

On behalf of Shaw Fishman Glantz & Towbin LLC (the “Firm”), I want to thank you for the opportunity to represent you in connection with your debt restructuring activities, which may include the commencement of a reorganization case under chapter 11 of the Bankruptcy Code (the “Matter”).

The Firm’s policy at the outset of an engagement is to outline not only the purpose and boundaries of the relationship but also the foundation on which the Firm will provide and bill for legal services. This letter confirms the terms of our engagement and certain additional matters with respect to that engagement.

BASIC TERMS OF ENGAGEMENT

A. Scope of Services and Related Matters

1. Scope

The Firm will represent the Client in connection with the Matter described above. The Client and the Firm may agree to modify the terms of this engagement, including the scope of the Matter, based upon circumstances that may arise during the course of the engagement.

The Client and the Firm both have responsibilities in this engagement. We expect the Client’s complete, truthful, and prompt disclosure of all facts and developments pertaining to the Matter. Further, the Client is responsible for abiding by the fee arrangement and for prompt payment of the Firm’s invoices. The Client expressly agrees that if any invoice is not timely paid, the Firm has the absolute right to terminate the engagement and immediately withdraw as counsel for the Client in the Matter.

Joseph Porada, M.D.

November 29, 2017

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The Firm, on the other hand, will be responsible for the following: review of underlying documents, facts and legal theories germane to the Matter; consultations with the Client as well as with co-counsel, opposing parties and counsel; preparation of necessary documents and correspondence; court appearances; and other activities relating to the Matter.

The Firm will take direction from the Client concerning all actions that we deem advisable and will not undertake significant action without first consulting with and receiving authorization from one of you. Although the Firm will provide the Client with our best professional judgment concerning the outcome, timing, and benefits to be obtained from the results of the Matter, there are inherent uncertainties in the legal process that prevent us from guaranteeing that results will always meet expectations.

2. *Identification of Client*

The Firm has been engaged to undertake the representation of Client, and the scope of our engagement will be limited to the Matter, as outlined herein. Unless specifically agreed to in writing, the Firm has not been retained to represent, and does not have an attorney-client relationship with: (i) any member, officer, director, employee or agent of the Client; (ii) any parent, subsidiary, or other affiliate of the Client; (iii) any partnership of which the Client is a partner (general or limited) or any joint/multiple venture or unincorporated association of which the Client is a member; or (iv) any fund or account managed by the Client. (As a consequence and as provided below, the Firm may, during the representation of the Client, continue or take on representations of other clients which are adverse to any such individuals or entities (the "Client Affiliates").)

B. Fees and Billing Matters

1. Fees

The Firm's fees for this engagement will be based upon hourly billing rates assigned to the individuals performing the services, which vary depending primarily on seniority. My hourly rate is \$475. Due consideration will also be given to other factors, including the nature of the services, the results obtained and the extent to which our efforts contributed to those results, the novelty and difficulty of the issues involved, the time constraints imposed upon us and the fees customarily charged for similar services. A list of the Firm's hourly rates for attorneys and paraprofessionals that will be applicable to this Matter is attached. Our rates, which compare favorably with those of other Chicago-area firms with similar experience and expertise, are adjusted periodically (typically around the first of each calendar year) to reflect changes in the Firm's costs and market and other conditions. Should a rate change be implemented at any time during this engagement, we will promptly advise you.

Although Steven B. Towbin and I will have overall responsibility for your representation, other attorneys and paralegals at the Firm may work on the Matter. I will delegate projects related to the engagement to other Firm attorneys and paralegals consistent with the nature of the projects, the experience of the other attorneys or paralegals, and the need to maintain continuity in the engagement. The Firm attempts to use personnel charging the lowest hourly rate, provided that the quality and timing of the work is not compromised.

Joseph Porada, M.D.

November 29, 2017

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Travel time (excluding regular commuting) related to the matter will be billed at one-half regular rates except to the extent that a lawyer works on other matters while traveling.

2. Non-Professional Charges and Disbursements

In addition to our professional fees, our invoice will also include a listing of out-of-pocket expenses directly attributable to the engagement. Such expenses, charged at the Firm's actual cost, would include items such as filing fees, transcript costs, Westlaw and other online research charges, messenger and delivery charges, photocopies, and travel costs.

Non-professional charges represent charges we assess for non-professional support services where the amounts attributable to each matter cannot be determined directly from invoices. These support services may be rendered by third parties (as in the case of computerized research), in which case our charge is based on an allocation of the actual cost to us in providing the service, or they may be provided directly by the firm (as in the case of document processing), in which case our charge is based upon consideration of our cost as well as the customary charges of alternative providers.

Disbursements, on the other hand, represent dollar-for-dollar reimbursement of amounts paid by the firm to third parties on your behalf, where the specific amounts attributable to each matter can be determined directly from the invoices rendered by such third parties.

Unless special arrangements are made, fees and expenses of others (such as local counsel, experts, investigators, witnesses, consultants and court reporters) and other large disbursements will not be paid by our firm and will be the responsibility of, and billed directly to, the Client.

3. Billing Frequency

Prior to the filing of a bankruptcy case, the Firm will submit invoices on a monthly basis, which invoices shall be payable upon receipt. Subsequent to the filing of a bankruptcy case, invoices, fees and expenses will be treated in accordance with the Bankruptcy Code, applicable rules and order of the bankruptcy court.

The Firm is requiring the payment of a \$50,000 retainer ("Retainer") from you to commence our representation under this engagement and will ask for an additional retainer to insure (a) all services and expenses provided prior to the commencement of the bankruptcy case are accounted for and (b) services and expenses provided post-filing will be accounted for as well. Any Retainer will be treated by the Firm as an advance payment retainer. Please be advised, that as a client, you generally have the right to ask that your retainer be treated as a security retainer that would be maintained in our client trust account for your benefit, rather than as the requested advance payment retainer. However, in light of the financial issues that you are experiencing, the risk of attachment and the nature of debtor representation in general, our firm will not undertake representation of you unless the Retainer is agreed to be, and treated as an advance payment retainer. Accordingly, by your signature herein below, you acknowledge that any Retainer is an advanced payment to the Firm for legal services to be rendered in connection with the Matter.

Joseph Porada, M.D.

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4. *Terms of Payment*

Our bills are payable upon receipt and are expected to be paid within thirty (30) days after the bill date. You may find it convenient to wire transfer your remittances directly to our bank account at:

Account Name:	Shaw Fishman Glantz & Towbin LLC
Account No.:	1760001155
ABA No.:	071001737
Bank Address:	MB Financial Bank N.A. 1200 N. Ashland Ave. Chicago, IL 60622

If for some reason you do not timely pay our invoices, work on the Matter cannot continue and we will be forced to withdraw from representation of the Client in connection with this Matter. In the unfortunate event that we are required to institute collection proceedings for any unpaid invoices, the Client agrees that the Firm will have the right to seek and recover, and Client will pay, all of the Firm's costs and expenses in conjunction therewith, including reasonable attorneys' fees, at trial and through all levels of appellate review. We have found that problems and misunderstandings about billing can be greatly minimized by promptly raising questions or comments about our services and charges.

C. Termination

Either the Client or the Firm may terminate this engagement at any time for any reason by written notice, subject on our part to applicable rules of professional responsibility. Unless previously terminated, this engagement will terminate upon the completion of our assignment. Upon termination of this engagement and unless otherwise specifically agreed in writing, the Firm's representation of the Client will end, and thereafter there will be no ongoing attorney-client relationship between the Firm and the Client or obligations of the Firm to advise you with respect to changes in law or other developments.

D. Governing Law

This Agreement shall be governed by and construed in accordance with the law of the State of Illinois, without regard to conflict of law provisions that might provide for the application of the law of any other jurisdiction.

ADDITIONAL MATTERS RELATING TO THIS ENGAGEMENT

The commencement of instructions from the Client, or continuation of instructions to us on this Matter constitutes your full acceptance of the terms set out above and below. With respect to the matters set forth below, we ask that you also confirm your agreement, after obtaining any further information you deem necessary and after such advice from other counsel as the Client deems appropriate by signing and returning to us a copy of this letter. Based on our prior discussions, the Firm understands and assumes that these additional terms govern our engagement, but requests that you confirm your agreement in writing for our files.

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A. Conflicts, Disclosures and Consents

We are not aware of any other representation by the Firm, which would preclude us from undertaking this engagement or adversely affect our ability to complete it. The Client is not aware of any information to the contrary.

Solely during the term of this engagement, the Firm agrees that it will not accept representation of another client to pursue interests that are directly adverse to those interests of the Client in this Matter, unless and until we make full disclosure to the Client of all the relevant facts and circumstances of our undertaking the two representations, and confirm to you in good faith that we have done so and that each of the following criteria is met: (i) there is no substantial relationship between any matter in which we are representing the Client and the matter for the other client; (ii) any confidential information that we have received from the Client will not be available to the lawyers and other personnel involved in the representation of the other client; (iii) our effective representation of the Client and the discharge of our professional responsibilities to the Client will not be prejudiced by our representation of the other client; and (iv) both clients have consented in writing based on our full disclosure of the relevant facts and circumstances of our undertaking the two representations.

In addition, we may consult at our own expense with lawyers at Shaw Fishman or elsewhere with respect to our own ethical and professional obligations with respect to our representation of you. The Client consents to such consultations, waives any conflict of interest relating thereto, and agrees that such consultations are protected by Shaw Fishman's own attorney-client privilege.

B. Use of Information Obtained in Other Representations

It is possible that, in connection with its representations of other clients, the Firm may have obtained or may obtain in the future information with respect to the Client or other matters which the Firm may be prohibited from disclosing to the Client or using in connection with our representation of the Client because of obligations to such client or otherwise. The Client acknowledges and agrees that the Firm is not under an obligation to disclose such information to the Client or to use such information in connection with our representation of the Client and the Client further agrees that it will not assert that the Firm has an actual or potential conflict or has breached any duty or obligation to the Client by virtue of the Firm's possession of such information, our not revealing such information to the Client, and/or our not using such information in connection with our representation of the Client.

C. Client Files

Upon completion or other termination of this engagement and payment of our final bill (unless otherwise required by law), the Client's files with respect to this engagement (the "File") will be delivered to you at your request. The Client acknowledges and agrees that the Client's files do not include the Firm's accounting records, or other internal Shaw Fishman documents, e-mails or communications or drafts of any documents prepared by us in connection with this engagement. We will retain documents relating to this engagement only so long as we deem appropriate or as required by law and thereafter may dispose of documents or other materials.

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The Firm will have no obligation to maintain or store the Client's files or related papers, documents, and other tangible things following termination of the engagement, except as required by Illinois law. If you do not take possession of the File within thirty (30) days of termination of the engagement, we will have the right but not the obligation to destroy the File in a confidential manner.

D. Data Protection

The Firm will collect, process, store and transfer all personal data disclosed to us by you ("Personal Information") in compliance with relevant data protection laws and regulations for the purposes set out in our Privacy Policy (<http://www.shawfishman.com/privacy/>). You acknowledge and agree that we may collect, process, store and transfer your personal data within the offices of the Firm and/or to our agent(s) (including any third parties retained by us together with their successors and assigns), including to a jurisdiction outside the European Economic Area, in accordance with relevant data protection laws and regulations and as set out in our Privacy Policy.

E. Confidentiality of Materials Submitted to the Firm

The Firm agrees that all Invoices, and all other materials and information provided to the Firm in connection with the Matter, will be kept confidential and will not be discussed with or disclosed to any third party who is not the Client, except to the extent necessary to be disclosed in any legal proceeding relating to the fees, or as required by process of law.

* * * * *

Please signify your agreement to the arrangement for legal services described in this letter by returning a signed copy of this engagement letter (as an e-mail attachment if convenient) to us as promptly as possible. We appreciate the opportunity to represent you and will endeavor to provide prompt, efficient, and responsive services at all times. If you have any questions, please feel free to call me.

Very truly yours,

SHAW FISHMAN GLANTZ & TOWBIN LLC



Terence G. Banich

Agreed to this 29 day of November, 2017

Joseph Porada, M.D.



Joseph Porada, M.D.

2017 STANDARD HOURLY RATES	
MEMBERS	
Robert M. Fishman	\$725.00
Steven B. Towbin	\$725.00
Ira Bodenstein	\$525.00
Robert W. Glantz	\$530.00
Brian L. Shaw	\$545.00
Peter J. Roberts	\$495.00
Thomas M. Horan	\$495.00
Jeffrey L. Widman	\$480.00
Richard A. Saldinger	\$480.00
David S. Horwitch	\$475.00
Allen J. Guon	\$475.00
Terence G. Banich	\$475.00
Mark L. Radtke	\$475.00
Joseph L. Cohen	\$420.00
S. Jarret Raab	\$420.00
Gordon E. Gouveia	\$435.00
Carrie E. Davenport	\$420.00
David L. Shaw	\$390.00
OF COUNSEL	
Richard M. Fogel	\$475.00
Jennifer L. Goldstone	\$425.00
Johnna M. Darby	\$425.00
Genevieve M. Daniels	\$395.00
John W. Guzzardo	\$395.00
ASSOCIATES	
Laura E. Caplin	\$365.00
David R. Doyle	\$355.00
Allison B. Hudson	\$325.00
Christina Sanfelippo	\$270.00
PARAPROFESSIONALS	
Patricia Fredericks	\$220.00
Carlene S. Gordon	\$220.00
Robert R. Damon	\$190.00
Bernard Thomas	\$145.00
Maria Zavala	\$145.00

**United States Bankruptcy Court
Northern District of Illinois**

In re Joseph J Porada, Jr.

Debtor(s)

Case No.

Chapter 11

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: 17

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: December 6, 2017

/s/ Joseph J Porada, Jr.

Joseph J Porada, Jr.

Signature of Debtor

Comcast/Xfinity
PO Box 3002
Southeastern, PA 19398-3002

ComEd
3 Lincoln Center
Attn: Bankrupcy Group
Oakbrook Terrace, IL 60181

Cook County Treasurer
Law Dep't.
118 North Clark Street
Chicago, IL 60602

Country Acres Condominium Assoc
Country Acres HOA
640 Murray Lane Box CACHA
Des Plaines, IL 60016

Estate of Arthur M Heath
c/o Latimer Levay Fyock LLC
55 W Monroe St #1100
Chicago, IL 60603

Illinois Dept. of Revenue
P.O. Box 19017
Springfield, IL 62794-9017

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

James Porada
650 W 57th St
Clarendon Hills, IL 60514

James Yiu-Tin Ching
c/o Scopelitis Garvin Light
30 W Monroe St #600
Chicago, IL 60603

Laura J. Porada
216 Middaugh Rd
Clarendon Hills, IL 60514

Mohammad Rezai MD
c/o Latimer Levay Fyock LLC
55 W Monroe St #1100
Chicago, IL 60603

Nicor Gas
Bankruptcy Dept
PO Box 549
Aurora, IL 60507

Northern Trust Platinum Visa
PO Box 6335
Fargo, ND 58125-6335

Philip Ducato
650 W. 57th St #1
Clarendon Hills, IL 60514

Rathje & Woodward LLC
300 E Roosevelt Rd
Wheaton, IL 60187

Robin B. Blakkolb, DDS
6800 S. Main St #106
Downers Grove, IL 60516

Xfinity
155 Industrial Dr
Elmhurst, IL 60126